



REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE

State Form 4606 (R10/11-03)  
Indiana Election Commission (IC 3-9-5-14)  
Approved by State Board of Accounts 1999

(CFA-4)

Summary Sheet

FILE NUMBER

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

FILED

2014 JAN 14 PM

TOTAL PAGES IN ENTIRE CFA-4 REPORT

IS THIS AN AMENDMENT? ☐ Yes ☐ No

PEGGY BEAVER  
CLERK

5

COMMITTEE INFORMATION

1. Full name of committee (as on Statement of Organization) ☐ Check if this is a new name

STEVE HOLT FOR COMMISSIONER

2. Acronym or abbreviated name, if any

3. Committee telephone number

(317) 848.9545

4. Mailing address (address where all campaign finance correspondence is received) ☐ Check if this is a new address

666 HAMPSHIRE CT.

5. City, state, ZIP code

CARMEL, IN 46032

6. Party affiliation (if applicable)

REPUBLICAN

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full name of candidate (include any nickname)

STEVEN A. HOLT

8. Party affiliation or if independent candidate

REPUBLICAN

9. Office sought (Include district number, if any. Not required for exploratory committee.)

COUNTY COMMISSIONER

10. County of residence

HAMILTON

TYPE OF REPORT

11. Check one:

- ☐ Pre-Primary ☐ Pre-Election ☒ Annual ☒ Final/Disbands Committee (lines 18, 19, and 20 must be "0")  
☐ Outgoing Treasurer (within 10 days amend Statement of Organization)

CONVENTION CANDIDATES ONLY

Check one:

- ☐ Pre-Convention  
☐ Post-Convention

12. Reporting Period:

From: JANUARY 1, 2013 Through: DECEMBER 31, 2013

COLUMN A  
This Period

COLUMN B  
Year to Date

13. Cash on hand and investments at the beginning of this reporting period.

24,997.70

14. Cash on hand and investments January 1, current year.

24,997.70

CONTRIBUTIONS AND RECEIPTS

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (use Schedule A)

15b. Unitemized

15c. Add lines 15 a and 15b in both columns

SUBTOTAL

16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B

TOTAL

24,997.70

24,997.70

EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (use Schedule B) (Public Question: use Schedule C)

24,752.15

24,752.15

17b. Unitemized

245.55

245.55

17c. Add lines 17a and 17b in both columns

SUBTOTAL

24,997.70

24,997.70

18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) TOTAL

- 0 -

- 0 -

19. Debts OWED BY the committee (use Schedule D)

- 0 -

20. Debts OWED TO the committee (use Schedule E)

- 0 -

CERTIFICATION

I, TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Title  
Treasurer

Date  
1/3/14

Date  
1/4/14

not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly  
3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana  
Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

FOR OFFICE USE ONLY

2014 JAN 14 PM 1:30

PEGGY BEAVER  
CLERK

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(CFA-4 SCHEDULE B)  
ITEMIZED EXPENDITURES

Approved

**INSTRUCTIONS:** Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (**over \$200, if regular party committee**). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) **MUST** be itemized on this schedule.

FILE NUMBER

Page 1 of 4

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code <u>C</u> Girl Scouts of Central Indiana 7611 Waterfront Parkway East Drive, Suite 100 Indianapolis, IN 46214	-	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	500. <sup>00</sup>		1/6/13
Code <u>O</u> Steve Holt 83 South 9TH St. Noblesville, IN 46060	Attorney County Commissioner	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	195. <sup>00</sup>		1/6/13
Code <u>C</u> Governor's Luncheon for Scouting 7125 Fall Creek Rd. Indianapolis, IN 46256	-	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	1,000. <sup>00</sup>		1/6/13
Code <u>C</u> Hamilton County Mayors Breakfast for Scouting 7125 Fall Creek Rd. Indianapolis, IN 46256	-	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	3,000. <sup>00</sup>		1/6/13
Code <u>C</u> Boy Scouts of America Sea Base 73800 Overseas Highway Islamorada, FL 33036	-	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	1,500. <sup>00</sup>		1/6/13
Code <u>C</u> CAC BSA Clausenough Firecrafters Fund 7125 Fall Creek Rd. Indianapolis, IN 46256	-	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	1,000. <sup>00</sup>		1/6/13
Code <u>C</u> CAC BSA 7125 Fall Creek Rd. Indianapolis, IN 46256	-	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	2,000. <sup>00</sup>		7/6/13
SUBTOTAL THIS PAGE OF SCHEDULE B			\$ 9,195. <sup>00</sup>		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$		



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RECIPIENT'S NAME AND MAILING ADDRESS) (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code 0 Holt, Fleck & Romine 83 South 9th St. Noblesville, IN 46060	County Commissioner	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: Postage	174.15		1/27/13
Code C Scout Troop 936 Kyle Aldrich Eagle Project	-	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose:	1,000.00		3/3/13
Code 0 Image Builders P.O. Box 69 Noblesville, IN 46061	County Commissioner	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose:	397.37		3/3/13
Code 0 Braden Business Systems 4430 Priority Way, West Dr. Indianapolis, IN 46240	County Commissioner	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose:	108.17		3/3/13
Code C The Heartland Institute One South Wacker Drive Suite 2740 Chicago, IL 60606	-	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose:	1,000.00		7/7/13
Code C Elect Luke Kenley P.O. Box 809 Noblesville, IN 46061	STATE SENATOR STATE SENATOR	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose:	500.00		9/8/13
Code C Mark Bower for Sheriff 18100 Cumberland Dr Noblesville IN 46061	Sheriff Sheriff	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose:	250.00		10/6/13
SUBTOTAL THIS PAGE OF SCHEDULE B			\$ 3,429.69		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$		



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Code <u>C</u> CAC BSC Claubach Firecracker Fund 7125 Fall Creek Rd. Indianapolis, IN 46256	-	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	2,000. <sup>00</sup>	3,000. <sup>00</sup>	10/6/13
Code <u>C</u> Paul Felix for Judge P.O. Box 3388 Carmel, IN 46082	Judge Circuit Court Judge	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	250. <sup>00</sup>		10/27/13
Code <u>C</u> Legacy Fund 515 E. Main St., Suite 100 Carmel, IN 46032	-	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	1,000. <sup>00</sup>		12/28/13
Code <u>C</u> Conner Prairie 13400 Allisonville Rd. Fishers, IN 46033	-	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	2,000. <sup>00</sup>		12/28/13
Code <u>C</u> Governor's Luncheon for Scouting see above	-	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	1,000. <sup>00</sup>	2,000. <sup>00</sup>	12/28/13
Code <u>C</u> Michigan Maritime Museum 260 Dyckman Ave. South Haven, MI 49090	-	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	1,000. <sup>00</sup>		12/28/13
Code <u>C</u> Hamilton County Mayor's Breakfast for Scouting see above	-	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	3,000. <sup>00</sup>	6,000. <sup>00</sup>	12/28/13
SUBTOTAL THIS PAGE OF SCHEDULE B			\$ 10,250. <sup>00</sup>		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$		



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	OFFICE SOUGHT (if applicable)				
Code <u>C</u> <u>CAC BSA</u> <u>Clabaugh Firecrafters Fund</u> <u>See above</u>	-	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	1,000.00	4,000.00	12/28/13
Code <u>C</u> <u>The Heartland</u> <u>Institute</u> <u>See above</u>	-	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	877.38	1,877.38	12/28/13
Code _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:			
Code _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:			
Code _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:			
Code _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:			
Code _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:			
SUBTOTAL THIS PAGE OF SCHEDULE B			\$ 1,877.38		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$ 24,751.15		